DODIIS JOINT INTEGRATION TEST FACILITY (JITF) WORK PLAN FOR OFFSITE TESTING

The following information is required by the JITF in order to facilitate the overall test process. The work plan is divided into two sections: Administration and Test. Please provide all data requested in each section. Use the *Tab* button to easily navigate through this document (<Shift> *Tab* to move in reverse).

SECTION 1 - ADMINISTRATION

JITF Representative: _____

Mission Application Name: _____

Version: _____

Test Dates: _____

Personnel

Please provide requested information for all personnel who will attend the evaluation.

Name (Last, First, MI)	Org	Email	Phone

Clearance Information
Please provide a location for JITF personnel to pass required clearances, including POC name, phone number, required clearance level, and any special instructions required for site access below.

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Report Distribution
Provide address for distribution of the JITF test report.

NAME: _____

OFFICE Symbol: _____

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Street: _____

City, State ZIP: _____

Documentation

Documentation must be provided to CM at Rome Laboratory 14 days before the start of testing. Changes to the due dates must be coordinated with your JITF representative.

Document	Due Date	Received
Requirements Definition Documentation		
Requirements Traceability Matrix		
Security Accreditation Documentation		
Test Plans, Procedures, and Test Reports		
Interface Control Document		
Software Version Description		
User Documentation		
Configuration and Installation Guide		
Transition Plans		
Open Problem Reports		

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<u>SECTION 2 - TEST</u>

Test Objectives/Requirements

Check all objectives/requirements that apply.

Integration Testing: ☐   JITC Interoperability: ☐   Security Testing: ☐

E-mail Connectivity: ☐   PKI: ☐   JWICS access: ☐

Other (Please explain below) ☐

Additional information/requirements:

-

If completing a Joint Interoperability Test Center (JITC) test during this evaluation, specify Mission Application Name and Version number for each interface required for the interoperability test:

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Test Environment

Using the following tables, please provide information for **<u>EACH</u>** Server and Client required to support the application evaluation.

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Configuration Table (For help, tab (<Shift> tab to move in reverse) to the field in question and press F1)

Configuration Item	Servers		Clients	
	(UNIX)	**(PC)**	**(UNIX)**	**(PC)**
Number of Servers / Clients	-Select-	-Select-	-Select-	-Select-
Domain / Workgroup (PC only)	▨		▨	
PDC / BDC (PC only)	▨	PDC ☐ BDC ☐	▨	▨
Minimum Hardware Platform				
Recommended Hardware Platform				
O.S. version [List any special release dates in the Additional Information section (if any)]	-Select-	-Select-	-Select-	-Select-
O.S. modules/packages Extra modules/packages(if any)	-Select-	▨	-Select-	▨
Required O.S. Patches [Special patch instructions should be entered in the Additional Information section (if any)]	*Current patches only*	*Current patches only*	*Current patches only*	*Current patches only*
Minimum Memory (RAM)				
Recommended Memory (RAM)				
Disk Space for data/executables				
Partition listing with sizes				
Network Configuration				
Peripheral Devices	Drives ☐ Printers ☐ Other ☐ Notes:			
Additional Information				

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- List all **Software** (COTS, GOTS, shareware, infrastructure software or freeware) and respective versions that are necessary for the operation of the application. Indicate if the software is included with the installation of the mission application or if the software must be installed prior to the start of test. List all necessary licenses. For all software requiring a license, specify if the license is provided with the mission application or if it must be acquired separately. Indicate if the PMO is able to provide permanent licenses. If temporary licenses are to be provided, please indicate their duration.

Software Table (It is assumed that AFDI/JEDI will be installed on each system. If this is not the case for your application please note that in the Additional Information section below.)

Application Name / Version	COTS / GOTS / Shareware	Required Disk Space	Software provided by PMO (Yes / No)	Install Prior to Test Start (Yes / No)	License Provided (Yes / No)	License Expiration Date	Which platform(s) will this be installed on?

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APPLICATION/NETWORK CONFIGURATION AND MISSION

APPLICATION/NETWORK CONFIGURATION AND MISSION

Please provide:

1) A diagram of the test network showing machine names and types, network connections, and external sources on a separate page.

2) A softcopy version of the diagram to the JITF Representative via e-mail.

3) A completed softcopy of the vulnerability assessment worksheet '*va_worksheet.xls*', to

Intelink: JITF@rome.ic.gov

Internet: <JITF Representative's email address>

In the space below, please provide a written overview of the application's mission and configuration.

ADDITIONAL INFORMATION

Directions to Site:
Please provide directions to the site, including street address or building number, POC name and phone number as well as any special instructions required for site access (required base passes or government identification cards, authorized parking areas, etc).

Other Information:
Please include any additional information or comments that will assist the JITF (e.g., special instructions, lessons learned, etc.).